

Initial Report

Submitted on December 14, 2004

Introduction

On May 11, 2004 Governor Joseph E. Kernan signed an Executive Order creating the Indiana Commission for Early Learning and School Readiness. The establishment of this commission came through the recommendation of the Indiana Education Roundtable's *P-16 Plan for Improving Student Achievement*.

The commission, co-chaired by Superintendent of Public Instruction Dr. Suellen Reed and the Governor's Chief of Staff Mary Downes, consisted of 33 members, who are listed below:

Dr. Suellen Reed, Superintendent of Public Instruction, Rushville, co-chair

Mary Downes, Governor's Chief of Staff, South Bend, co-chair

Rep. Ralph Ayres, Chesterton, representing the House of Representatives

Rep. Gregory Porter, Indianapolis, representing the House of Representatives

Sen. Gary Dillon, Columbia City, representing the Senate

Sen. Connie Sipes, New Albany, representing the Senate

Marilyn Schultz, Indianapolis, ex-officio, non-voting member (State Budget Agency)

Cheryl Sullivan, Indianapolis, ex-officio, non-voting member (FSSA)

Patricia G. Burton, Indianapolis, representing public school principals

Dr. Wendy Robinson, Fort Wayne, representing superintendents with full-day kindergarten

Dr. Ena Shelley, Indianapolis, representing teacher training programs

Robert Marra, Noblesville, ex-officio, non-voting member, (Dept. of Education)

Mary E. Davis, Richmond, representing full-day kindergarten teachers

Pearl Prince, Gary, representing preschool cooperatives/early learning centers

Dr. Denna Renbarger, Lapel, representing directors of preschool cooperatives

Dr. Brent Leichty, Bourbon, representing parents

Marlane Rae Tisdale, Indianapolis, representing local school boards

Lynn Silvey, Pendleton, representing parents

Dr. Kay Harmless, Indianapolis, representing the Indiana Child Care Fund

Kim Dodson, Westfield, representing children with disabilities

Elvia "Annie" Porter, West Terre Haute, representing home care providers

David Holt, Indianapolis, representing business

Jenny Sarabia, Indianapolis, ex-officio, non-voting member

A. Nanette Bowling, Kokomo, representing Head Start providers

Evelyn Ridley-Turner, Indianapolis, ex-officio, non-voting member (Dept. of Correction)

Dr. Gregory Wilson, Indianapolis (Marion Co.), ex-officio, non-voting member (Dept. of Health) Dianna Wallace, New Castle, representing the Ind.. Assoc. for the Education of Young Children Debbie Beeler, Mitchell, representing communities

Timothy Dunnuck, Bloomington, representing the Child Care Center (Indiana University) Dr. Carol Touloukian, M.D., Bloomington, representing pediatricians Britt Magneson, South Bend, representing curriculum development specialists Dr. Maria Del Rio-Hoover, M.D., Evansville, representing child development Gwen Long-Lucas, Hamilton County, representing "Y" early childhood programs

The Commission members met once per month for two hours to discuss the status of early learning and school readiness in Indiana and begin to form recommendations for action. The dates of the 2004 meetings were: June 22nd, July 27th, August 24th, September 28th, October 21st, November 16th, and December 14th. Each meeting was held from 1:30pm until 3:30pm in Government Center South, Conference Room B. Kathy Politz served as staff liaison for the Department of Education, and Ted Maple served as staff liaison for the Governor's office.

The Process: Meeting Highlights

On June 22, 2004 Governor Joe Kernan addressed the members of the Early Learning and School Readiness Commission and spoke to:

- The responsibility to make sure that each child's potential is fully realized
- The most important investment can be made in quality early learning and full-day kindergarten
- A hope that giant strides can be made instead of baby steps

Governor Kernan thanked the Commission members and charged them to go forth with their leadership and guidance.

During the following meetings the Commission worked through the process of prioritizing the myriad of issues that surround early learning and school readiness. Building on the goal of the *P-16 Plan* and the Executive Order, the members heard from several speakers in Indiana involving early childhood initiatives and relevant topics. Some of those speakers included:

- Cheryl Orr from the Indiana Education Roundtable, speaking about the *P-16 Plan*
- Dr. Judy Ganser from the Indiana Department of Health, speaking about the *Early Childhood Comprehensive Systems* project (ECCS)
- Cecelia Johnson from United Way of Central Indiana, speaking about Success by Six
- Dr. Lanier DeGrella from the Family and Social Services Administration, speaking about the status of child care in Indiana
- Dianna Wallace from the Indiana Association for the Education of Young Children (IAEYC), speaking about professional development
- Suzanne Clifford from the Family and Social Services Administration (FSSA), speaking about the *Peak Performance Project*

Under the guidance of Rilyn Gipson, a group process facilitator for the Blumberg Center for Interdisciplinary Studies in Special Education at Indiana State University, Commission members worked in groups around four prioritized themes or "issue areas." These themes were: (1)

Access, (2) Quality and Coordination, (3) Parents, and (4) Full-day Kindergarten. The following sections will summarize the process these groups used in forming recommended action steps.

Issue Area: Full-day Kindergarten and Kindergarten Entrance Date

Background

Research on the effects of full-day kindergarten has produced overwhelmingly positive findings. Quality full-day kindergarten programs can result in academic and social benefits for children (Elicker and Mathur, 1997; Hough and Bryde, 1996; Nelson, 2000; Wichita Public schools, 1989). Full-day students have been shown to perform better in measures of academic achievement (Hough and Bryde, 1996; Sheehan et al., 1991; Wichita Public Schools, 1989), to be more actively engaged in the classroom (Elicker and Mathur, 1997), and to exhibit more positive behaviors than peers in half-day or alternate-day programs (Cryan et al., 1992). Full-day kindergarten students have also been found to attend school more regularly than students in half-day or extended programs (Hough and Bryde, 1996) and are better prepared for first grade (Nelson, 2000).

Research identifies that reading performance increases significantly with full-day kindergarten instruction. In a study conducted by a midwestern school district in collaboration with a nearby university, the effectiveness of three different kindergarten schedules was examined. The full-day kindergarten group scored significantly higher in reading that did an alternate-day and half-day group (Hildebrand, C., 2001). A longitudinal study of full-day kindergarten in the Evansville-Vanderburgh School Corporation revealed academic, social, and behavioral benefits. On standardized tests, full-day kindergarten children performed significantly better than half-day kindergarten children in third, fifth, and seventh grades on the CTBS (Source: Indiana Education Policy center (1998). Early-Age Entry, Preschool, and Full-day Kindergarten: Options for Indiana: A Briefing on the Research Literature. Indiana University. 50-54). For advanced students, there is time to complete increasingly challenging long-term projects. For children with developmental delays or those "at-risk" for school problems, there is more time for completion of projects and more time for teacher/student interaction.

Full-day Kindergarten programs can result in social benefits. In a longitudinal study by J.R. Cryan (1992), children in full-day kindergarten programs showed more positive behavior than their peers in half-day kindergarten in areas of originality, independent learning, involvement in classroom activities, productivity with their peers, and their approach to the teacher.

Research finds strong support for quality full-day kindergarten programs among parents and educators. Teachers find quality full-day kindergarten programs beneficial for children and families. Full-day teachers have more time to get to know children and address their individual needs, because they are responsible for fewer students than they would be with two half-day sessions. Teachers also report that the longer schedule provides flexibility and a less stressful environment in which they can provide "more appropriate challenges for children at all developmental levels" (including students with developmental delays and those who are advanced) (Elicker and Mathur, 1997). Within a full-day kindergarten program, teachers

acknowledge and appreciate the additional instructional time to address the Kindergarten Indiana Academic Standards. Because of a full-day schedule, teachers are better able to detect learning problems that would be harder to detect in a half-day program. This early detection helps to offset some future special education costs (Chmelynski, 1998). Parents, with children in high quality full-day kindergarten programs, note more in-depth learning opportunities and individual attention from teachers (Elicker and Mathur, 1997; Hough and Bryde, 1996). At the end of the second year of Elicker and Mathur's study (1997), "100% of full-day parents and 72% of half-day parents indicated they would have selected the full-day program for their child given the choice" (p. 476).

The number of transitions many kindergarten children face in a typical day can be reduced by full-day kindergarten. Due to family work schedules, children who attend half-day programs may be cared for by three or more care givers over the course of a day.

While full-day kindergarten does not eliminate the need for child care outside of school (Clark, 2001, Elicker and Mathur, 1997), many parents, who are given the choice, prefer full-day because children have fewer transitions. Two-way transportation can also be an important benefit of full-day kindergarten and help to lessen transitions for young children. Currently, most school corporations in Indiana only provide one-way transportation for half-day kindergarten students. There are a number of children in Indiana who are unable to attend kindergarten because their parent(s) do not have access to transportation during the day.

Full-day Kindergarten in Indiana:

The Indiana General Assembly allocated \$10 million per year for the biennium for Full-day Kindergarten (P.L. 291-2001). The purpose of the Full-day Kindergarten Grant is for school corporations to provide full-day kindergarten programs to improve the academic and social development of children in kindergarten. These full-day kindergarten programs are required to follow the Indiana State Board of Education Kindergarten Curriculum Rules (511 IAC 6.1-5-1), to have a curriculum consistent with the Indiana Academic Standards (IC 20-10.1-16.6), and to remain within the school corporation's Prime Time guidelines (IC 21-1-30).

In the 2001-2002 school year, 113 of the 293 eligible school corporations in Indiana participated in the Full-day Kindergarten Grant. The grant provided approximately 6300 kindergarten students expanded learning opportunity. During the 2002 Legislative Session, the funding was cut 15 % from &10,000,000 to \$8,500,000. In school year 2002-03, 130 eligible school corporations in Indiana out of 293 participated in the Full-day Kindergarten Grant. The grant provided approximately 6500 kindergarten students expanded learning opportunity. In 2003-04, there were again 130 out of 293 school corporations in Indiana submitting an Intent to Participate in the Full-day Kindergarten Grant. In school year 2004-05, 154 out of 293 school corporations in Indiana submitted an Intent to Participate in the state funded Full-day Kindergarten Grant. At the time of this report, the number of classrooms impacted by this grant is not yet known.

According to studies by High Scope Educational Research Foundation in Michigan, every government dollar spent on preschool education produces a \$7 return when you consider decreases in remedial education costs and correctional system expenditures and increased tax revenues from a better-educated work force.

Extending the kindergarten day, alone, does not ensure success. Full-day kindergarten programs must be of high quality and developmentally appropriate. Ongoing, effective professional development opportunities are necessary to support teachers and administrators in creating high quality full-day kindergarten programs.

Indiana's July 1 Kindergarten Entrance Date is, by far, the earliest in the nation. Thousands of Indiana children are not eligible for kindergarten until they are 6 years old. The next closest state is Missouri with a date of August 1. The majority of states have a date in September with September 1 being the most common date. Indiana is the only state that does not welcome any July or August born children into kindergarten. National early childhood experts describe Indiana's Kindergarten Entrance Law as the approach not to be taken.

The children in Indiana who turn five in July and August do not just lose two months but an entire year of essential early education opportunities. Research shows that quality early education experiences greatly benefit children academically. The current Kindergarten Entrance Law puts Indiana in the position of delaying these vital opportunities for children longer than any other state in the nation. For many Indiana children, especially those at-risk kindergarten is their first opportunity for the kind of essential early education necessary for this development. As stated in "Brain Research Manifests Importance of First Years" (Simmons & Sheehan, February 16, 1997), "...the period of time that defines a child's greatest learning potential (is) roughly from the ages of 2 to 10". The current Kindergarten Entrance Law takes away a year of these vital experiences in this short window of opportunity. Having disadvantaged children spend an extra year in non-stimulating environments will likely put them even further behind their peers who have access to quality educational opportunities.

Research also shows that delaying kindergarten until age six does not result in improvement in reading, writing, or math skills. Delayed entrants, four to twelve years after entering school, were no more academically skilled, athletically involved or socially successful than students who had entered kindergarten after just turning five years old. In addition, students who are one year too old for a grade level are much more likely to drop out of high school (1998, National Association of School Psychologists. School Entry Decisions: A Guide for Parents, 1). Parents often believe that with additional time, their child will outgrow a possible problem. When in actuality, children who may have problems benefit from early intervention. What parents fail to realize is that the sooner the nature of the problem is identified, the sooner the child can receive special services that may help the child overcome the problem.

Increasing the odds of favorable developmental outcomes is a wise public investment. A variety of services have been designed to address the needs of young children whose future prospects are threatened by socioeconomic disadvantages, family disruptions, and diagnosed disabilities. They all share a belief that early childhood development is susceptible to environmental influences and that wise public investments in children can increase the odds of favorable development outcomes. The scientific evidence resoundingly supports these premises (*Neurons to Neighborhoods: The Science of Early Childhood Development*, 2002, The National Academy of Sciences).

Moving the Kindergarten entrance date to September 1 will provide thousands of children in Indiana quality early education experiences at this critical time of their development. Projecting from current kindergarten enrollment, 92 % of Indiana school corporations will gain fewer than 50 kindergarten children in a year. In most cases the added enrollment would be spread across a number of schools in the corporation. Much of the estimated state "cost" to move the date is not an additional cost for educating a child. Over 9 million of the local education agencies projected 28 million (14 million per month) additional costs for the next biennium is for state tuition support, most of which the state will incur in whatever year the child enters kindergarten.

Parents with summer born children will still have the choice of waiting another year before sending their children to kindergarten. Kindergarten is not currently mandatory in Indiana and compulsory education does not begin until the year of the child's 7th birthday. Changing the entrance date will not force any children to attend school earlier, but will welcome children who turn five in July and August.

Commission Work

Guided by the Executive Order and the *P-16 Plan*, the Commission priorities included the following goal: *Support full day kindergarten for all children*. Work group members Denna Renbarger, Marlane Tisdale, Patricia Burton, Britt Magneson, David Holt, Mary Davis, Wendy Robinson, and Representative Gregory Porter spent time over three meetings and interim communications in order to refine recommended action steps.

When asked to identify barriers to achieving the goal of "providing full day kindergarten," the majority of the work group discussions centered primarily on these two challenges:

- 1. Funding full day kindergarten.
- 2. Convincing the parents, taxpayers, and stakeholders of the need/urgency of full day kindergarten.

The group had several discussions about strategies for overcoming those barriers, which included:

- Appropriate resources in place before implementation.
- Staff development is how to implement standards in a developmentally appropriate way.
- Start with research that is bipartisan and unbiased that create results. Use the results for marketing campaign to public, which will create reprioritization of state funds and will give the state full day kindergarten.
- Before we make kindergarten mandatory, we must first have full day kindergarten implemented.
- To ensure that all children have as much access to a high quality kindergarten program stipulated by our current state standards, the entry date must be September 1st, and children must have access to a full day kindergarten program.
- Full day kindergarten is characterized by the following:
 - o Curriculum aligned to standards that is developmentally appropriate
 - Comprehensive staff development
 - o Parent involvement component
 - o Transition plans (pre- and post-)

Upon considering the limited timeline, barriers, and varied strategies, the work group put forth the following recommended action step (Commission endorsement included):

Recommendation: Support Full-Day Kindergarten for all children and move Kindergarten						
entrance date to September 1.						
Recommended Action Steps:	Commission Endorsement					
-	(Yes, No, or No Response):					
			_			
Full day kindergarten must be a state funding priority. All	Yes	No	NR			
state funding resources must be reallocated. Full day						
kindergarten, as an option, will be available to every						
kindergartener by 2007-2008.	76%	3%	21%			
The kindergarten entrance date is September 1 st with a	Yes	No	NR			
funding cap of 34 million over two years.						
	76%	3%	21%			

Issue Area: Access

Background

The demand for *preschool*, which typically refers to a formal educational setting for children ages three through five, is increasing across the U.S. According to a recent report by the National Institute for Early Education Research (NIEER), most recent numbers indicate that two-thirds of four-year-olds and more than 40% of three-year-olds enroll in a preschool program. Similarly, demand for child care, or non-custodial care, is also on the rise. Much of the current need for early care and education is due to a changing workforce. According to the Families and Work Institute, women now make up more than 49% of the workforce, and dual-earner couples have increased from 66% in 1977 to 78% today (2004).

However, demand is not the only reason for increased attention and popularity of early care and education programs. Study after study reveals that high quality early childhood education can have lasting effects on the lives of young children, and for society. A prominent example of one such study is the *High/Scope Perry Preschool Study Through Age 40*. This longitudinal work, out of the High/Scope Educational Research Foundation in Ypsilanti, Michigan, followed a group of randomly selected children who were given a high-quality preschool experience during the 1960s. Data were collected on this group, as well as a group who did not receive the preschool program, at ages 14, 15, 19, 27, and 40. The group that received preschool outperformed the "no program group" in the following areas:

- High school graduation
- Level of education
- Treatment of mental impairment
- Grade repetition
- Employment rate
- Annual and monthly income
- Home ownership

- Car ownership
- Need for social services
- Crime prevention
- Health of adult relationships

The researchers and authors of the Perry Preschool Study found the following in their "cost-benefit analysis": "In constant 2000 dollars discounted at 3%, the economic returns to society of the Perry Preschool program was \$258,000 per participant on an investment of \$15,166 per participant -- \$17.07 per dollar invested...(of) that return, \$195,621 went to the general public -- \$12.90 per dollar invested."

In addition to the federal Head Start program, which is available to a limited number of preschool-age low-income children and families, many states offer public preschool in anticipation of the type of social and economic returns mentioned above. However, Indiana is one of 12 states in the U.S. that offers no state-funded preschool program. Indiana children who qualify for special education are eligible for preschool enrollment provided by public schools. These children make up 5% of the three-year-old population, and 7% of the four-year-old population. Indiana children ages three and four in Head Start make up 5% and 8% of the total population respectively.

As mentioned above, the need for child care increases each year. Currently, there are more than 430,000 children under the age of five in Indiana. Access to high quality child care for young children is a serious issue. The following statistics reveal the issue through data collected as of July 31, 2004.

- 630 licensed child care centers in Indiana (capacity 61,830)
- 3,179 licensed child care homes in Indiana (capacity 38,051)
- 644 registered ministries in Indiana

The trend is that the number of licensed centers and homes is decreasing while the number of registered ministries (exempt from licensing) continues to increase.

Finding affordable child care is also a challenge for many families who have the need. Federal funding through the Family and Social Services Administration's child care voucher program has decreased, as has the number of recipients from 91,090 children in FFY 2000 to 57,964 children in FFY 2004. In mid-September 2004, there were over 12,800 children on a waiting list for child care vouchers in Indiana. As of December 15, 2004, that number had decreased to 9,661.

Commission Work

Guided by the Executive Order and the *P-16 Plan*, the Commission priorities included the following goal: *Make sure every child has access to high quality programs that help prepare them for school*. Work group members Dianna Wallace, Cheryl Sullivan, Debbie Beeler, Kim Dodson, Robert Marra, Marilyn Shultz, Jenny Sarabia, and Senator Gary Dillon spent time over three meetings and interim communications in order to refine recommended action steps.

When asked to identify barriers to achieving the goal of "ensuring access," the majority of the work group discussions centered primarily on these two challenges:

- 1. Educating the public on the importance of early learning and school readiness
- 2. Every community has access to affordable high quality programs that help prepare children for school

The group had several discussions about strategies for overcoming those barriers, which included:

- Initiate a statewide campaign by a collaborative of organizations focusing on young children (e.g. AARP, parents, pediatricians, unions, employers, teachers).
- Educate the public through a comprehensive media campaign including radio, TV, billboards, newspaper stories and ads, brochures, public service announcements, a speakers bureau, and a website.
- Use a simple message regarding young children and brain research.
- Target audiences (for the campaign) including the population without children, grandparents, elderly, work parents, etc.
- Employ a targeted approach by involving business, engaged public, and engaged parents.
- Provide access in every community by strengthening the following issues: curriculum standards (*Foundations for Young Children to the Indiana Academic Standards*), collaboration, teacher degree requirements, class size, adult to child ratio, meal requirements, and public funding

Upon considering the limited timeline, barriers, and varied strategies, the work group put forth the following recommended action step (Commission endorsement included):

Recommendation: Make sure every child has access to high quality programs that help prepare them for school.					
Recommended Action Steps:	Commission Endorsement				
	(Yes, No, or No Response):				
		1	•		
Educate the public on the importance of early learning and	Yes	No	NR		
school readiness through a statewide collaboration of					
organizations focusing on young children and a	79%	0%	21%		
comprehensive media campaign.					
Provide access to high quality preschool programs in	Yes	No	NR		
every community building on public/private programs					
(schools, child care providers, Head Start).	70%	9%	21%		

Issue Area: Quality and Coordination

Background

In the report *Eager to Learn: Educating Our Preschoolers*, the Commission on Behavior and Social Sciences and Education stated the following about...

Features of Quality Programs:

There are a number of broadly supported findings regarding components of quality preschool programs. Cognitive, social-emotional (mental health), and physical development are complementary, mutually supportive areas of growth all requiring active attention in the preschool years. Social skills and physical dexterity influence cognitive development, just as cognition plays a role in children's social understanding and motor competence. All are therefore related to early learning and later academic achievement and are necessary domains of early childhood pedagogy. Responsive interpersonal relationships with teachers nurture young children's dispositions to learn and their emerging abilities. Social competence and school achievement are influenced by the quality of early teacher-child relationships, and by teachers' attentiveness to how the child approaches learning. Both class size and adult-child ratios are correlated with greater program effects. Low adult-child ratios are associated with more extensive teacher-child interaction, more individualization, and less restrictive and controlling teacher behavior. Smaller group size has been associated with more child initiations, and more opportunities for teachers to work on extending language, mediating children's social interactions, and encouraging and supporting exploration and problem solving.

Curriculum:

While no single curriculum or pedagogical approach can be identified as best, children who attend well-planned, high-quality early childhood programs in which curriculum aims are specified and integrated across domains tend to learn more and are better prepared to master the complex demands of formal schooling. Particular findings of relevance in this regard include the following: 1. Children who have a broad base of experience in domain-specific knowledge (for example, in mathematics or an area of science) move more rapidly in acquiring more complex skills. 2. More extensive language development such as a rich vocabulary and listening comprehension is related to early literacy learning. 3. Children are better prepared for school when early childhood programs expose them to a variety of classroom structures, thought processes, and discourse patterns. This does not mean adopting the methods and curriculum of the elementary school; rather it is a matter of providing children with a mix of whole class, small group, and individual interactions with teachers, the experience of discourse patterns associated with school, and such mental strategies as categorizing, memorizing, reasoning, and metacognition.

Professional Development:

The professional development of teachers is related to the quality of early childhood programs, and program quality predicts developmental outcomes for children. Formal early childhood education and training have been linked consistently to positive caregiver behaviors. The strongest relationship is found between the number of years of education and training and the appropriateness of a teacher's classroom behavior. Programs found to be highly elective in the United States and exemplary programs abroad actively engage teachers and provide high-quality supervision. Teachers are trained and encouraged to reflect on their practice and on the responsiveness of their children to classroom activities, and to revise and plan their teaching accordingly.

Additionally, many teachers and other practitioners in the field are guided by the position statement of the National Association for the Education of Young Children entitled Developmentally Appropriate Practice for Early Childhood Programs Serving Children Birth through Age Eight. According to this document:

Developmentally appropriate practices result from the process of professionals making decisions about the well-being and education of children based on at least three important kinds of information or knowledge:

- 1. what is known about child development and learning -- knowledge of age-related human characteristics that permits general predictions within an age range about what activities, materials, interactions, or experiences will be safe, healthy, interesting, achievable, and also challenging to children;
- 2. what is known about the strengths, interests, and needs of each individual child in the group to be able to adapt for and be responsive to inevitable individual variation; and
- 3. knowledge of the social and cultural contexts in which children live to ensure that learning experiences are meaningful, relevant, and respectful for the participating children and their families.

Many early childhood programs that seek to follow *Developmentally Appropriate Practice* also abide by the accreditation standards of the National Academy for Early Childhood Programs, the accreditation arm of NAEYC. In Indiana, the Department of Education has teamed with early childhood professionals from around the state to identify "learning standards" for young children called the *Foundations for Young Children to the Indiana Academic Standards*. An increasing number of teachers are becoming familiar with this tool to help guide their practice, and develop quality programs.

Commission Work

Guided by the Executive Order and the *P-16 Plan*, the Commission priorities included the following goal: *Improve quality and coordination of early childhood education and school readiness services including child care, preschool, and family support services and programs.* Work Group Members: Ena Shelley, Timothy Dunnuck, Maria Del Rio Hoover, Elva "Annie" Porter, Gwen Long-Lucas, Pearl Prince, and Representative Ralph Ayers spent time over three meetings and interim communications in order to refine recommended action steps.

When asked to identify barriers to achieving the goal of "improving quality and coordination," the majority of the work group discussions centered primarily on these three challenges:

- 1. Providing high quality preschool.
- 2. Providing high quality staff.
- 3. Defining quality regulations and standards across the field.

The group had several discussions about strategies for overcoming those barriers, which included:

• Create a tax stream that funds early childhood education just like is currently done with K-12 education.

- Regulate preschools, centers, home, and ministries.
- Encourage school corporations to be supportive of early/preschool education programs.
- Network with other services (in early education).
- Create an office of early childhood education at the state level (like Ohio and Illinois).
- Increase required credentials for early childhood education staff.
- Increase salaries and benefits for early childhood education staff.
- Implement a professional career ladder for early childhood education.
- Provide forgiveness for student loans for early childhood staff.
- Increase resource support for teachers (training, professional development, supplies/materials).
- Educate teachers about developmentally challenged children and behavior disorders.
- Improve and increase professional development.
- Provide a system of high quality early childhood education of high quality early childhood education programs.
- Ensure a cadre of professional, high quality early childhood staff.

Upon considering the limited timeline, barriers, and varied strategies, the work group put forth the following recommended action step (Commission endorsement included):

Recommendation: Improve quality and coordination of early childhood education and school readiness services including child care, preschool, and family support services and				
Recommended Action Step:	Commission Endorsement (Yes, No, or No Response):			
Create a designated position in the Department of Education that coordinates early childhood education in Indiana.	Yes	No 18%	NR 21%	

Issue Area: Parents

Background

Item number eleven in the Executive Order states: "The commission shall identify and build on successful initiatives currently in place to ensure that parents acquire the skills needed to be successful as their child's first teacher and focus on nationally accepted standards for parents. Further, the Commission shall identify strategies to improve and increase parent involvement in pre-kindergarten education as well as at the kindergarten level".

Several successful initiatives with strong parent components currently exist in Indiana and are briefly highlighted below.

The Indiana Association for Child Care Resource and Referral (IACCRR)

• maintains, modifies, and updates a statewide database of child care supply and demand

- provides technical assistance for the statewide delivery of CCR&R services that support the delivery of a higher standard of service for families, child care providers, and communities
- provides oversight and management of the indianaworklife.com initiative as a strategy to impact economic development by engaging employers to participate in financial solutions that will assist their employees, low wage earners, with the cost of child care
- provides referrals and consumer education for parents and Orientation Training and outreach services for Spanish speaking, parents and child care providers
- provides oversight and management of the Better Baby Care Indiana infant/toddler project that will provide child care provider training and mentoring, community outreach, parent education and parent enhanced referrals

The Indiana Child Care Health Consultant Program: Resource for Child Care Providers in Indiana help keep children in child care healthy and safe. The purpose of the Child Care Health Consultant Program is to increase the level of health and safety in child care settings across Indiana. The program is free to all child care providers who would like support in increasing the health and safety of their program. Child Care Health Consultants who are employees of Indiana University can partner with providers to:

- assess health and safety needs and practices in the child care setting;
- connect caregivers and families with community health resources and experts;
- assist in developing policies and procedures for health and safety issues;
- provide health education for staff, families, and children;
- offer solutions for managing injuries or infectious diseases within child care settings;
- access appropriate resources to assist in successfully including children with special health, medical, and/or behavior needs;
- provide up-to-date knowledge on the latest guidelines, policies, and information;
- offer support though telephone advice, email and /or on-site visits; and
- conduct child care staff training

Child Care Health Consultants partner with local, regional, and state agencies and organizations to assure that services are provided without duplication. This program is funded by the Indiana State Department of Health, Maternal and Child Health Services, utilizing funds provided by Indiana Family Social Services Administration, Division of Family and Children.

Home Instruction for Parents of Preschool Youngsters (HIPPY) was developed by the National Council of Jewish Women's Research Institute in Education at the Hebrew University in Israel. Today there are 112 sites in which approximately 15,000 educationally disadvantaged families participate in 25 states. The scope of HIPPY's work is to:

- provide training and technical assistance to existing programs;
- develop program curriculum;
- disseminate information;
- coordinate research and evaluation efforts; and
- develop regional capacity for training and technical assistance

HIPPY's basic tenet is that all parents want the very best for their children, but not all parents know how to develop their children's potential. HIPPY provides parents with weekly packets that clearly illustrate step-by-step activities that parents can do to prepare their children for

school. HIPPY activities are role played between the paraprofessionals and parents. The HIPPY program is supervised by a professional coordinator whose primary responsibility is to train and support the paraprofessionals.

Parents As Teachers (PAT) in Indiana is an award winning parent education and family support program serving families throughout pregnancy until their child enters kindergarten. The program is designed to enhance child development and school achievement through parent education accessible to all families. Parents as Teachers offers families personal visits by certified parent educators; group meetings; developmental health; hearing and vision screening; and linkage with community resources. It is a universal access model that is adaptable to the needs of diverse families, cultures and special populations. The components of PAT are: home visits; group meetings; screening; and resource network. The Indiana House of Representatives passed a concurrent resolution (HCR 0014), sponsored by Representative Vernon Smith (D), vice chair, Education Committee, recommending that Parents As Teachers (PAT) be offered in every school district in Indiana. The first program was established in 1988 in Indiana in the Metropolitan School District of Washington Township, Marion County. To date, there are 62 PAT programs in the state located in 26 counties. Thirteen PAT's were established in the 90's, three new ones in 2000, ten in 2001, ten in 2002, and twelve in 2003. To date in 2004, thirteen new programs have been established. Thirty-five percent of PAT programs are sponsored by school districts.

The Head Start Program was established in 1965 as a pilot project in the summer with 516,000 children enrolled. The budget was \$96,400,000. Head Start has served over 22 million children since it began in 1965. This year 909,608 children are enrolled in Head Start and early Head Start programs at a cost for FY 2004 of \$6,774,848,000. The average cost per child is \$7,092. The Head Start program consists of three cornerstones:

- Early Development and Health Services
- Family and Community Partnerships
- Program design and Management

The following are facts about Indiana Head Start:

- 14.148 children are enrolled in Head Start and Early Head Start programs:
- the total Head Start budget is \$93,523,057;
- the cost per child is \$6,610, which is 90% of the national average;
- there are 41 Head Start and Early Head Start grantees;
- there are 43 Head Start programs and 14 Early Head Start programs;
- there are 744 Head Start or Early Head Start classrooms with 354 of them as double sessions; and
- over 21,400 Head Start/Early Head Start parents volunteered in the programs this year

Healthy Families Indiana is a voluntary home visitation program designed to promote healthy families and healthy children through a variety of services including child development, access to health care and parent education. Administered by the Family and Social Services Administration, Healthy families Indiana is designed to strengthen families and promote healthy childhood growth and development. It is hoped that these efforts will reduce child abuse and

neglect, childhood health problems and juvenile delinquency. By working closely with hospital maternity wards, prenatal clinics, and other local agencies, Healthy Families systematically identifies families that could benefit from these education and support services either before or immediately after birth.

The following are characteristics of Indiana sites;

- 56 sites serve families in all 92 counties;
- 15,111 assessments were done during the 2003 fiscal year;
- 50% of assessments are done prenatal; and
- 14,378 families received home visiting services

Healthy Families Indiana currently has partnerships that include:

- First Steps Early Intervention Program;
- Women, Infants and Children (WIC);
- Early Head Start;
- Head Start Memorandum of Understanding;
- Office of Family and Children;
- Division of Mental Health;
- Juvenile Justice Institute; and
- Hospitals

In response to a lack of parent involvement in schools, Three For Me was founded in 2003 by Dee Keywood and Kris Thompson. The purpose of Three For Me is to:

- promote a promise for parent to child of at least three school volunteer hours;
- open doors to the school so that parents feel welcome and needed;
- promote father involvement in schools;
- provide resources and workshops to assist parents in better supporting their child;
- communicate creative volunteer opportunities;
- develop a spirit of volunteerism through parent modeling to child; and
- facilitate increased parent involvement and communication between child and family, family and school, and family and community

Commission Work

Guided by the Executive Order and the *P-16 Plan*, the Commission priorities included the following goal: *Ensure that parents acquire the knowledge, skills and resources needed to be successful as their child's first teacher*. Work group members Carol Touloukian, Kay Harmless, Nanette Bowling, Evelyn Ridley-Turner, Lynn Silvey, Brent Leichty, and Senator Connie Sipes spent time over three meetings and interim communications in order to refine recommended action steps.

When asked to identify barriers to achieving the goal of "parents as first teachers," the majority of the work group discussions centered primarily on these two challenges:

1. Improving reading of parents (and emphasizing) the importance of reading.

2. (Lack of) funding for supplies and training for parents to become their child's first teacher.

The group had several discussions about strategies for overcoming those barriers, which included:

- Continue and support current literacy programs.
- Plan a Governor's summit on the importance of reading (bringing all literacy groups together) into statewide coalition.
- Spearhead campaign to be done in phases with the Department of Education and the Family and Social Services Administration.
- Create a public relations campaign with targeted groups.
- Promote storytelling and/or reading programs and/or public service announcements on TV with celebrity readers.
- Build on successes of already existing programs.
- Develop legislation that mandates a life skills course to be a required class prior to graduation with key components including but not limited to:
 - o Importance of reading
 - How to write a check
 - o The importance of reading to children
 - o How reading to a child establishes a connection can lessen child abuse
- Establish a web site of available literacy/reading resources
- New cable companies, prior to opening business in Indiana, must have free GED/literacy classes.
- Create a statewide literacy coalition
 - o Network existing successful programs throughout the state
 - o Provide literacy tools/resources to parents, educators, health care professionals, church groups, social service professionals
 - o Ensure ready access of these literacy tools/resources at the community level
- Develop a multifaceted campaign
 - o Will have a simple, consistent literacy message to parents empowering them to be their child's first teacher
 - Tangible literacy tools will be given to all families with young children (e.g. physician's offices, WIC clinics, social service agencies, early childhood programs)
 - o Statewide media campaign

Upon considering the limited timeline, barriers, and varied strategies, the work group put forth the following recommended action step (Commission endorsement included):

Recommendation: Ensure that parents acquire the knoto be successful as their child's first teacher.	wledge,	skills and	resources needed
Recommended Action Steps:	Commission Endorsement (Yes, No, or No Response):		
Resurrect and/or enhance the statewide literacy coalition.	Yes	No	NR
	70%	9%	21%
Establish a multi-faceted campaign (for parents regarding early literacy).	Yes	No	NR
•	73%	6%	21%
A parenting component will be included in a "life skills" curriculum to be required for high school graduation.	Yes	No	NR
	58%	21%	21%

Summary

In conclusion, the majority of the members of the Indiana Early Learning and School Readiness Commission recommend the following action steps:

- Educate the public on the importance of early learning and school readiness through a statewide collaboration of organizations focusing on young children and a comprehensive media campaign.
- Provide access to high quality preschool programs in every community building on public/private programs (schools, child care providers, Head Start).
- Create a designated position in the Department of Education that coordinates early childhood education in Indiana.
- Resurrect and/or enhance the statewide literacy coalition.
- Establish a multi-faceted campaign (for parents regarding early literacy).
- A parenting component will be included in a "life skills" curriculum to be required for high school graduation.
- Full day kindergarten must be a state funding priority. All state funding resources must be reallocated. Full day kindergarten, as an option, will be available to every kindergartener by 2007-2008.
- The kindergarten entrance date is September 1st with a funding cap of 34 million over two years.

Additionally, it is the recommendation of the members of the Commission to persist with the initial work for young children and families in Indiana that began in May of 2004 through the Indiana Early Learning and School Readiness Commission.

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